United States Of America

Bepartment of Transportation - Hederal Abiation Administration

Supplemental Type Certificate

Number SAZ695SW

This Certificate issued to

AAR Aircraft Services, Inc. DBA: AAR Aircraft Services-Oklahoma 6611 South Meridian Oklahoma City, OK 73159-1104

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 4b of the Civil Air Regulations.

Original Product Type Certificate Number :

A2SW

Israel Aircraft Industries

Model: 1121, 1121A, 1121B

Description of Type Design Change:

Installation of aircraft taxi lights on main landing gears according to Drawing 1121-211008, Sheet 1, Chg. B dated 12/9/79, Sheet 2 dated 3/11/77, Drawing 1121-451005, Sheet 1, Chg. A dated 5/12/77, and Sheet 2 dated 3/11/77, or later FAA approved revisions.

Limitations and Conditions:

FAA Approved Airplane Flight Manual Supplement dated December 15, 1977, is required.

Compatibility of this mcdification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application : April 21, 1977

Date reissued: 10/25/85; 3/5/99

Date of issuance: December 15, 1977

Date amended: August 20, 1980 Rev. 1

By direction of the Administrator

(Signature) Frances Cox, Manager

Special Certification Office,

Southwest Region

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of the Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of S	Supplemental Type Certificate Number
co (Name of transferee)	
(Address of transferee)	(Number and street)
	(City, State, and ZIP code)
from (Name of grantor) (Prin	nt or type)
(Address of grantor)	(Number & street)
-	(City, State, and ZIP code)
Extent of Authority (if lic	censing agreement):
Date of Transfer:	
	(In ink):